



# HIGHWAYS ACT 1980: APPLICATION TO DEPOSIT A BUILDER'S SKIP ON THE PUBLIC HIGHWAY

## IMPORTANT:

- (i) 7 WORKING DAYS ARE REQUIRED TO PROCESS AN INITIAL PERMIT FOR A & B ROADS/ PEDESTRIAN AREAS AND 3 WORKING DAYS FOR NON-CLASSIFIED ROADS FROM RECEIPT OF A VALID APPLICATION AND FEE
- (ii) 3 WORKING DAYS ARE REQUIRED TO PROCESS A RENEWAL FROM RECEIPT OF A VALID APPLICATION AND ADDITIONAL FEE

## RENEWAL

	Yes	No	
Is this request to renew an existing permit?	<input type="checkbox"/>	<input type="checkbox"/>	If yes please state previous permit number <input style="width: 100px;" type="text"/>
	£14.00	£14.00	

## APPLICATION

Address at which the skip is to be sited \_\_\_\_\_

Number of skips .....

Size of skip/s .....m x .....m

Skip/s to be sited from ...../...../..... to ...../...../.....  
(inclusive – no longer than 7 days on A & B class roads/ pedestrian areas or 14 days on any other class roads)

## DECLARATION & INDEMNITY

### Declaration

I/We have received and signed a copy of the Derbyshire County Council Standard Conditions for the placing of skips on the highway giving my/our undertaking to observe and abide by the conditions contained within that document as well as any other additional conditions which may be listed as part of this permit including payment of the associated application fee.

### Indemnity

In the event of Derbyshire County Council granting permission sought herein I/we agree to indemnify and hold harmless the Council from and against all actions in law or in equity, damages, statutory or common losses, costs, charges and expenses arising in any manner whatsoever out of the deposit of the skip, works or use of the above mentioned activity on the Public Highway.

Signature of skip owner..... Please print name.....

Name of company (if applicable) .....

Position in company (if applicable) .....

Company address .....

.....

Tel No. ....

Date ...../...../.....

**PAYMENT METHOD – Please tick relevant box**

**By cheque** – made payable to Derbyshire County Council the sum of £  Enclosed

**Invoice skip owner** (by prior arrangement)

**By cash** – in person only

**Return form to: Director of Environmental Services, County Hall, Matlock, Derbyshire DE4 3AG**  
**For telephone enquiries ring: 01629 538665**  
**Fax: 01629 538698/538126**

**NOTE: Payments received for applications cancelled due to no fault of the County Council will not be refunded**

**APPROVAL**

**FOR OFFICE USE ONLY**

Derbyshire County Council in exercise of their powers pursuant to Sections 139 & 140 of the Highways Act 1980 **GRANTS/REFUSES\*** permission for the placing of the skip/s specified above for the stated in accordance with said Standard Conditions. (**\*delete as appropriate**)

The following special conditions apply

.....  
.....  
.....  
.....

Payment received      Yes      Required  
                                      

Permit number .....

Signed .....(on behalf of the Highway Authority)

Print name ..... Date ...../...../.....